

## **We Still Need Universal Health Care**

**By**

**U.S. Representative Maurice Hinchey**

Although universal health care dropped from the national agenda after the collapse of the Clinton plan in 1994, the problem of uninsured and underinsured Americans has not gone away. In fact, the situation has gotten worse. At that time 37 million Americans had no insurance. Now there are 44 million, and the number keeps growing.

Incremental steps have been taken to address the problem, but what I believed in 1994 remains true today: the only real solution is guaranteed, universal, comprehensive insurance for everyone, the single-payer plan. Single-payer doesn't just insure select groups, like children or low-income persons; it insures everyone. It doesn't just offer "access" to insurance; it guarantees that everyone will have insurance, and that it will be affordable. It doesn't just insure in some cases or for some conditions; it covers all medically necessary services. It doesn't depend on your employment status; you're covered if your employer is big or small, if you work part-time or full-time, or if you're out of work. Moreover, it has been estimated that single-payer would cost much less than the present system, because it would sharply reduce administrative costs and eliminate marketing costs.

Unfortunately, although some of my colleagues and I continue to sponsor legislation that would create a single-payer health care system, the proposal has little chance of receiving any consideration at this time. Many of us may have laughed at the Harry and Louise commercials, but many others bought them hook, line and sinker. The ads frightened people by telling them they would have no choice. Of course, the truth is, most people have no choice now -- their employer picks the plan, or gives them two or three equally unattractive choices. People were also fearful of the term "government program." I knew universal health care was in trouble when I started getting letters saying, "I don't want any health care plan run by federal government. I want to keep my Medicare the way it is now!" That's the level of misunderstanding that the Harry and Louise ads propagated and the attitude proponents of single-payer are up against.

Incremental improvements in health care have been made since 1994. The Kennedy-Kassebaum law, for instance, prevented some people from being dropped from employer-paid health plans because of pre-existing conditions. In addition, the Children's Health Insurance program of 1997 provided money to states to insure some children who don't have insurance through Medicaid.

Other positive steps may be taken in the near future. I support a bipartisan managed care reform plan that would give patients access to needed specialty care, assure women of direct access to OB/GYN services, allow doctors to practice sound medicine without interference from insurance companies, and hold health plans accountable for their negligent medical decisions that lead to harm. This "Patients' Bill of Rights" legislation passed the House of Representatives in the last Congress with overwhelming support. But political maneuvering by the majority in the House and Senate killed the chances for final passage of a

meaningful reform bill. Recently, however, managed care reform was given hope when the new Senate leadership pledged to put it at the top of the Senate's agenda.

These bills are good interim measures but they do not provide the real answer. They still don't guarantee universal or comprehensive coverage. And they don't help people who aren't covered now. No one should be bankrupted by necessary treatment, and no one should live in fear of what happens if they get sick. We cannot lose sight of universal coverage as our goal. All Americans deserve it.